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**MILWAUKEE COUNTY EMS
OPERATIONAL POLICY
CONDUCTED ENERGY
DEVICES PATIENTS**

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POLICY: Milwaukee County EMS providers will apply usual Standards of Care, Medical Protocols, Standards for Practical Skills, and Operational Policies set forth by Milwaukee County EMS to patients who have been subjected to the use of a conducted energy devices (also known variably as “conducted energy weapon”, “electric control device”, “electronic restraint”, “tazer”, “taser”, or “stun gun”).

- I. Need for Medical Evaluation
 - A. Available scientific evidence suggests that not all patients subjected to a conducted energy device will require an EMS evaluation.
 - B. If requested/called by law enforcement, EMS providers will conduct a patient evaluation applying usual standards of care, protocols, skills, and policies.
- II. Need for Transport to Receiving Hospital
 - A. Available scientific evidence suggests that not all patients subjected to a conducted energy device will require hospital evaluation.
 - B. Patients will be transported if any of the following situations apply:
 1. Any patient age 12 years or younger
 2. Pregnant patients greater than or equal to 20 weeks in gestation
 3. Any abnormality of vital signs (see Standard of Care – Normal Vital Signs, with the exception that adult blood pressure of over 160/100 or below 100/70 is considered abnormal in these circumstances)
 4. Use of more than 3 device shocks on a patient
 5. Barbs that have hit in the following areas
 - i. Eyes/Orbits
 - ii. Neck
 - iii. Genitalia
 6. Significant trauma or mechanism of injury related to events before, during, or after device application (e.g. falls, MVC)
 7. Burns, if greater than mild reddening of the skin between the barbs
 8. Barbs that cannot be removed using usual methods (refer to Standards of Care – Conducted Energy Device Barb Removal)
 9. Persistent agitated behavior that is not responsive to verbal de-escalation
 10. History of coronary disease, CHF, cardiac arrhythmias, or AICD/pacer
 11. Other abnormal or unusual signs or symptoms persisting after shock (for example, numbness, paralysis, shortness of breath, chest pain, dizziness, loss of consciousness, profuse sweating, or others)
 - C. Patients will also be transported if, in the judgment of EMS or law enforcement, further evaluation is warranted.
 - D. Transport can occur at the level deemed appropriate by on-scene EMS personnel (follow usual protocols for BLS versus ALS level transport).